

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Crane Inc.
c/o Its Registered Agent:
The Corporation Trust Center
1209 Orange Street
Wilmington, DE 19807

07cv1064 Alias + C

COMPLETE THIS SECTION ON DELIVERY**A. Signature****X**PRINT Addressee**B. Received by (Printed Name)****DEC 27 2007****C. Date of Delivery****D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No****3. Service Type**

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes**2. Article Number***(Transfer from service label)***7003 3110 0004 0800 4429**

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540